

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	PETITION FOR ADOPTION <input type="checkbox"/> Step-Parent <input type="checkbox"/> Related Within 5th Degree <input type="checkbox"/> Other (Excluding Direct Adoption)	FILE NO.
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In the matter of _____, adoptee
Full name of child

☐ I, _____, join with my spouse in this petition for adoption (applicable to step-parent adoption only)
Name

	Name and Social Security Number	Relationship to Adoptee	Address, City, State, Zip	Date and Place of Birth
Adopting Mother				
Adopting Father				

Each adopting petitioner states:

☐ 1. An action within the jurisdiction of the family division of circuit court involving the family or family members of the minor has been previously filed in _____ Court, Case Number _____, was assigned to Judge _____, and ☐ remains ☐ is no longer pending.

2. I desire to adopt _____
Full name of child Birth date and time

City, county, and state of birth

Present residential address (if known)

3. The adoptee will be my heir at law.

4. The adoptee's name will ☐ not be changed.
☐ be changed to _____
First Middle Last

5. The adoptee's property is _____.

6. The adoptee's parents are:

Father's name _____	Birth date _____	Mother's name (and maiden name) _____	Birth date _____
Address _____		Address _____	
City, state, zip _____		City, state, zip _____	

☐ unknown because the rights of the parents have been terminated by a court of competent jurisdiction and parental rights are vested in _____
Name and address of court or agency

(PLEASE SEE OTHER SIDE)

Do not write below this line - For court use only

☐ 7. The adoptee's court appointed guardian and/or conservator is (attach copy of letters of authority):

Name

Address

City, state, zip

- ☐ 8. The adoptee has been living in the home of and with the petitioners for _____ months before the filing of this petition.
- ☐ 9. (applies only to step-parent adoptions) The noncustodial parent has failed to provide support or comply with a support order and failed to visit or contact the adoptee for a period of 2 years or more. (Attach form PCA 302, Supplemental Petition and Affidavit to Terminate Parental Rights of Non-Custodial Parent)
- ☐ 10. I have been unable to obtain the required consent to adopt the child from the court, Michigan Family Independence Agency, or child placing agency having permanent custody or from the persons to whom the child was released. A motion alleging that the decision to withhold consent was arbitrary and capricious is attached.

I REQUEST:

11. Termination of all existing parental rights inconsistent with the order of adoption, entry of an order approving placement of the child with me, and entry of an order of adoption with the adoptee's name recorded as _____ .
- ☐ 12. The adoption be completed immediately because: _____

- ☐ 13. The court to waive the required investigation because the adoptee has been placed in foster care with me for at least 12 months and a foster family study was completed or updated within the last 12 months.

I declare that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Attorney/Agency signature

Date

Attorney/Agency name (type or print)

Bar no.

Signature of petitioner mother

Address

Signature of petitioner father

City, state, zip

Telephone no.

Petitioner telephone no.

IT IS ORDERED:

14. _____
Court agent or employee, child placing agency, or Michigan Family Independence Agency
is directed to fully investigate and report its findings in writing to this court, within 3 months of this order, in accordance with the provisions of section 46 of the Michigan Adoption Code.
- ☐ 15. The full investigation is waived. The petitioner(s) shall file a copy of the most recent foster family study as updated and supplemented.

Date

Judge

Bar no.